

Pay Periods:  
26th thru 10th  
11th thru 25th

## Upper Arlington City Schools Building Sub/District Sub Time Record

\_\_\_\_\_  
Substitute Name (Please print.)

	Date	Assignment(s) /Addtl Per #'s	Full Day	Half Day	# of Addtl Per. @ \$10	1, 2 or DS*
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
<b>Totals</b>						

\_\_\_\_\_  
Substitute Signature

\_\_\_\_\_  
Date

1 = 1st Bldg Sub  
2 = 2nd Bldg Sub  
DS = Dist Sub

\_\_\_\_\_  
Administrator Approval

\_\_\_\_\_  
Date

\*\*\*Keep a copy for your records before submitting for payment\*\*\*

\*\*\*See reverse side for instructions on completing time records\*\*\*